KIBABII UNIVERSITY- ISO 9001:2015 QUALITY MANAGEMENT SYSTEMS					
ISSUED FOR USE IN 2020	POST TRAINING EVALUATION FORM FOR EMPLOYEES	REF: KIBU-ADM-F-041			



# POST TRAINING EVALUATION FORM FOR EMPLOYEES

2022



- A. Name of Employee(optional): \_\_\_\_\_
- B. Course Title:\_\_\_\_\_
- C. Training Provider:\_\_\_\_\_
- **D.** Course Facilitator(s):

No.	Name
1.	
2.	
3.	

E. TrainingDate(s):\_\_\_\_\_

#### F. Course Offering

Please Tick the Appropriate Box

Strongly	Disagras	Noutral	Agrees	Strongly
1	2	3	4	5

Strongly	Disagree	Neutral	Agree	Strongly
Disagree				Agree

S/NO	EVALUATION FACTOR	5	4	3	2	1
1	The course content met my needs/ requirements					
2	The presentation matched the description in course content.					
3	The topics were delivered as stated in the course timetable.					
4	There were enough training aids & equipment's					
5	The answers the facilitators gave to participants' questions					
	were clear.					
6	The facilitators provided illustrative examples.					
7	The training was well facilitated.					
8	The training allowed participants to use practical skills related					
	to important concepts.					
9	The training was an effective way for individuals to learn					
	important information.					
10	Participants were actively engaged in the training.					

Comments? (Please elaborate)



# **G.** The Course Facilitator(s)

# Please Circle the Appropriate Box:

	Poor		Average Excellent		
1) Knowledge and adherence to the subject	1	2	3	4	5
2) Preparation for each class	1	2	3	4	5
3) Communicated material effectively	1	2	3	4	5
4) Responded well to participants questions	1	2	3	4	5
5) Established positive rapport with participants	1	2	3	4	5

Comments? (Please elaborate)

# H. Additional Questions

- I. Please give any other additional comments or suggestions that you may have with regard to the entire training programme
- II. Briefly outline how this training was of value addition to Kibabii University as an Organization

